

APPLICATION FOR PROVISIONAL PERMIT FOR COMPLETED STOCKWATER PIT OR RESERVOIR

(capacity of the pit or reservoir must be less than 15 acre-feet)

INSTRUCTIONS

Pursuant to Section 85-2-306(6), MCA, this form may only be used to apply for a water use permit for a completed stockwatering pit or reservoir when the following criteria are met: (1) capacity is less than 15 acre-feet with an annual appropriation of less than 30 acre-feet; (2) located on a non-perennial flowing stream; and (3) constructed on and accessible to a parcel of land 40 acres or larger and owned or under the control of the applicant. (A perennial flowing stream means one that historically has flowed continuously during all seasons of the year—during dry as well as wet years.) If any of the above criteria are not met, Form No. 600 must be used. This form must be filed within 60 days after constructing the pit or reservoir. Submit the completed form and \$50 filing fee, payable to DNRC, to the regional office nearest to you listed on the back side of this form. The estimated processing time after an application is correct and complete is 30 days.

FOR DEPARTMENT USE ONLY

Application No. _____ Basin _____
 Priority Date _____
 Time _____ AM / PM
 Rec'd By _____
 Fee Rec'd \$ _____
 Check No. _____
 Refund _____ Date _____

1. **NAME OF APPLICANT** _____
 Mailing address _____
 City or Town _____ State _____ Zip _____
 Home Phone _____ Other Phone _____
2. **SOURCE OF WATER SUPPLY** ☐ Unnamed source - tributary to _____
☐ Stream name _____ - tributary to _____
3. **LOCATION OF PIT OR RESERVOIR** (Where dam crosses the source)
 _____ 1/4 _____ 1/4 _____ 1/4, Sec. _____, Twp. _____ N/S Rge. _____ E/W County _____
 Government Lot _____
 Bureau of Land Management only: Project Number and Name _____
4. **CAPACITY OF IMPOUNDMENT AND TOTAL APPROPRIATION** - Attach an "SCS As Built" survey, or use the formula below with current measurements of the pit or dam. Round numbers to one decimal place.
 - (a) Pit
 surface area _____ acres X maximum depth _____ feet X 0.5 = _____ capacity acre-feet
 - (b) Reservoir
 surface area _____ acres X maximum depth _____ feet X 0.4 = _____ capacity acre-feet
 - (c) Total Appropriation
 capacity _____ acre-feet X no. of fills/season _____ = _____ acre-feet
5. **ENLARGEMENTS**
 - (a) If this is an enlargement of a pit or reservoir already on file with the DNRC, what is the capacity of the existing pit or reservoir: _____ acre-feet.
 - (b) Identify the water right number for the existing pit or reservoir:
 Statement of Claim No. _____ Permit No. _____
6. **DATE CONSTRUCTION WAS COMPLETED** _____ month/day/year
7. **PERIOD OF USE** ☐ January 1 to December 31
☐ Other _____ month/day to _____ month/day

MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION

1424 9TH AVE., P.O. BOX 201601, HELENA, MT 59620-1601 444-6610

WEBSITE: <http://www.dnrc.state.mt.us/wrd/home.htm>



8. PLACE OF USE (The complete area covered by water should be identified.)

Will the water be used at the same location as that given for the pit or dam? (see number 3)

☐ Yes ☐ No If no, give location.

____ 1/4 ____ 1/4 ____ 1/4, Sec. _____, Twp. _____ N/S Rge. _____ E/W County _____

Government Lot _____

9. OWNERSHIP

Number of acres owned where pit or dam is located _____.

10. MAP

A map showing the following must accompany this application. Failure to supply an accurate map constitutes an incomplete application, and the application will be returned for completion. A copy of an ASCS aerial photo or USGS topographic map is sufficient.

(a) Township and Range Numbers

(c) Pit or Reservoir Location

(b) Section Numbers and Corners

(d) Other Place of Use (such as location of any stock tanks)

11. REMARKS Provide any additional information that would help explain how the pit or reservoir is constructed or operated.

12. FOR QUESTIONS or CLARIFICATION, WHOM SHOULD THE DNRC CONTACT?

Name _____

Address _____ Phone # _____

13. SIGNATURE

The applicant certified that the above information is a true statement of the extent to which the project was completed and used.

Applicant's Signature _____ Date _____

_____ Date _____

Subscribed and sworn before me this _____ day of _____



Notary's Signature _____

Notary for the State of _____

Residing at _____

My commission expires _____

MONTANA WATER RESOURCES REGIONAL OFFICES

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